

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

IN THE MATTER OF THE TEMPORARY GUARDIANSHIP OF

**Notice to Ward
of Appointment of
Temporary Guardian**

Date of Birth _____

Case No. _____

1. You are being notified that (name) _____ filed a verified petition for temporary guardianship of your ☐ person and/or ☐ estate. The court found that an immediate appointment of a guardian was required.
2. The following is/are appointed temporary guardian of the
☐ person (name) _____
☐ estate (name) _____
3. The authority of the temporary guardian shall be limited to the performance of duties respecting specific property or to the performance of particular acts as stated in the order of appointment. ☐ See attached copy of order.
4. This appointment may not exceed 60 days unless further extended for 60 days by an order of the court.

You have the right to counsel and the right to petition for reconsideration or modification of the temporary guardianship within 30 days of receipt of this notice.

Signature of Petitioner

Name Printed or Typed

Date